
Lab Dept: Transfusion Services

Test Name: TYPE AND SCREEN

General Information

Lab Order Codes: TYAS (Type and Screen, Routine)
TYSKA (Type and Screen, Additional – Known Antibody)

Synonyms: T & S; Pretransfusion testing; ABO/Rh and Antibody Screen; Type and Antibody Screen, Type and Screen, Additional

CPT Codes: 86900 – ABO
86901 – Rh
86850 – Antibody Screen
86870 – Antibody Identification (if appropriate)

Test Includes: ABO, Rh, and Antibody Screen. Antibody identification studies if indicated. If the patient has a known antibody, additional blood is required for testing as indicated by test TYSKA.

Logistics

Test Indications: When a patient is undergoing a procedure or treatment in which transfusion is unlikely. Pretransfusion testing for infants 8 days to 4 months old.

Lab Testing Sections: Transfusion Service

Phone Numbers: MIN Lab: 612-813-6824

STP Lab: 651-220-6558

Test Availability: Daily, 24 hours

Turnaround Time: 1 hour; STAT – 45 minutes

Special Instructions: If transfusion becomes necessary, order Transfuse Red Cell Group or Transfuse (Less Than 4 Months Old) test indicating products and time needed. If the antibody screen is negative and hemorrhage occurs, the Transfusion Service may issue blood of the patient's type immediately, without awaiting the crossmatch. The crossmatch will be complete in 5 – 10 minutes. If an unexpected antibody is detected in the initial Antibody Screen, the patient's physician will be alerted to the situation beforehand.

Specimen

Specimen Type:	Blood
Container:	TYAS: Lavender (EDTA) top tube TYSKA: 2-Lavender (EDTA) tops and 1-Red (No Gel) tube Alternate tube: Red top tubes will be accepted, but will delay specimen processing to allow for clotting. (SST tubes are Not acceptable.)
Draw Volume:	TYAS: 2 – 6 mL blood (EDTA) TYSKA: Please draw all of the following 2 mL (EDTA) tube (for Children's) 5 mL (EDTA) tube (for the reference lab) 5 mL Red (No Gel) tube (for the reference lab)
Collection:	All specimens submitted to the Transfusion Service must be appropriately labeled at the bedside with the time and date of collection, and the signature of the individual collecting the specimen. A completed order, either through the HIS or general requisition must accompany each specimen. It is not always necessary to collect a new sample prior to the provision of blood for patients. Consult with the Transfusion Service prior to collecting additional samples if the patient status is unknown.
Special Processing:	Lab Staff: Refrigerate specimen
Patient Preparation:	Refer to Collection of Patient Specimens for full details. The patient must be positively identified when the specimen is collected. The label on the blood specimen must correspond with the identification on the patient's Medical Record wrist or ankle band (or ED ID) and on the physician/practitioner's orders. The specimen must be timed, dated, and signed by the phlebotomist at the bedside.
Sample Rejection:	Gross hemolysis; sample placed in a serum separator tube; specimen tube not properly labeled

Interpretive

Limitations:	N/A
Methodology:	Hemagglutination-tube
References:	Brecher M, Technical Manual, Current Edition, Bethesda MD, AABB
Updates:	2/18/2008: Stat turnaround time previously listed as 30 minutes. Time increased due to gel. 10/10/2016: Test info for TYSKA added.